

PTO/SB/21 (09-04)

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number 10/686,221	RECEIVED CENTRAL FAX CENTER
		Confirmation Number 6364	MAY 09 2006
		Filing Date 10/15/2003	
		First Named Inventor Joseph Michael Christie	
		Art Unit 2664	
		Examiner Name	
Total Number of Pages in This Submission	16	Attorney Docket Number	1110d

ENCLOSURES (check all that apply)			
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1 Foreign Patent (8 pages) and 1 Non-Patent Literature Document (5 pages)	
		Remarks I hereby state that each item of information contained in this Information Disclosure Statement is being filed before the mailing date of a first Office Action on the merits pursuant to 37 CFR 1.97(b).	
		It is believed that no fees are due in this matter. However, if it is determined that fees are due, the Commissioner is authorized to debit Deposit Account No. 210785 for the required fees.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Setter Ollila LLC		
Signature			
Printed Name	Stephen S. Rocha		
Date	5-09-06	Reg. No.	52,176

CERTIFICATE OF TRANSMISSION/MAILING

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Signature	
Typed or printed name	Jamie Cameron
Date	5-09-06

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PTO/SB/08A (07-05)

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Substitute for form 1449A/PTO		Complete if Known	RECEIVED
INFORMATION DISCLOSURE STATEMENT BY APPLICANT		Application Number	10/686,221
(Use as many sheets as necessary)		Filing Date	10/15/2003
		First Named Inventor	Joseph Michael Christie
		Art Unit	2664
		Examiner Name	
Sheet	1	of	2
		Attorney Docket Number	1110d

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Signature		Date Considered	
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinda Codes of USPTO Patent Documents at www.uspto.gov or MPEP 801.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

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Substitute for form 1449B/PTO		<i>Complete If Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT		<i>Application Number</i>	10/688,221
		<i>Filing Date</i>	10/15/2003
		<i>First Named Inventor</i>	Joseph Michael Christie
		<i>Art Unit</i>	2664
		<i>Examiner Name</i>	
		<i>Attorney Docket Number</i>	1110d
<i>(Use as many sheets as necessary)</i>			
Sheet	2	of	2

Examiner Signature		Date Considered	
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